PTO-5808 (03-03)

TOTAL

ADOL FEE

OR

Constitution of the Consti PATENT APPLICATION FEE DETERMINATION RECORD 04/745/04 Substitute for Form PTO-875 CLAIMS AS FILED - PART I OTHER THAN SMALL ENTITY OR (Cotures 1) SMALL ENTITY (Column 2) FOR MANGER FILED MUMBER EXTRA RATE FEE RATE ÆF BASIC FEE (D) OFR 1.15(1) OR TOTAL CLANAS OF O'R 1.15(d) orteus 20 = OR DEPENDENT CLAIMS OF OFR 1.18(b) mina 3 e A 5 œя MATIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.18(4)) OR + 5 " If the difference in column 1 is less than zero, enter "O" in column 2. TOTAL OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Coherno 1) (Cotamo 2) (Catema 3) SMALL ENTITY SMALL ENTITY -CLAIMS REMAINING reckest ⋞ PRESENT MOURER ADDS-TIONAL RATE ACC) PAID FOR AMENDMENT AFTER MENDMENT FEE FEE Fotal prom Luipo 29 <u> 19</u> COCCE LUCE OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLASS (DZ CFR 1,1660) OR TOTAL ADD'L FEE TOTAL ADD'L FEE OR (Column 1) (Catumn 2) (Cotumn 3) CLAINS REMAINING HOGHEST 8 PRESENT ADDI-TEONAL RATE RATE ADDI-TIONAL **DMENT** AFTER AMENDMENT PREVIOUSLY PAID FOR FITRA FEE FEE CO COR LINES 9 OR Ω̈ Of Cast Fator A \$ FIRST PRESENTATION OF MATPLE DEPENDENT CLAM (37 CFR 1.16(m)) OR TOTAL ADDI FEE TOTAL ADD'L FEE OR (Column 1) (Cotumn 2) CLAIKS MICHEST O REMAINING MUMBER PREVIOUSLY PRESENT EXTRA ADDI-TIONAL FEE RATE RATE ACCO. ENT AFTER AMENDMENT TIONAL PAID FOR Total Cu CAN 1. Medi Minus AMENDM QR O1 CHR I GDD 00 FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(0)) OR

"If the Righest Number Previously Paid For" IN TNS SPACE is less than 3, enter "T.

The Righest Number Previously Paid For" (Yotat or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to life (and by the USPTO to process) an application. Confidentially is governed by 33 U.S.C. 122 and 37 CFR 1.16. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and exhaustion for the complete optical including gathering, preparing, and exhaustion for the complete optical including gathering, preparing, and exhaustionalized the completed application form to the USPTO. Time will vary depending upon the endividual care. Any comments on the amount of time you require to complete this form another suggestions for reducing this burden, should be sent to the Chief information Object, U.S. Patentian of Trademath (Silice, U.S. Department of Commence, P.D. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ARTHOLOGY. ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA-22313-1450.

TOTAL

ADD'L FEE

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

amn 1 is less than the entry in column 2, write "0" in column 3. of the "Righest Number Previously Paid For" IN THIS SPACE is less than 20, enter "2".

"If the "Righest Number Previously Paid For" IN THIS SPACE is less than 2, enter "2".